PART B - FEE(S) TRANSMIT L

Complete and se	nd this form, toget		P.: Al		tents	
INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	form should be need correspondence in dedicated below or directed of tions.	for transparring the ISS or the ISS ent, advance in Block 1, by	SUE FEE and PUBLICAT orders and notification of (a) specifying a new corre	TION FEE (if required), maintenance fees will be spondence address; and/o	Blocks 1 through 5 she mailed to the current cor (b) indicating a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for
CURRENT CORRESPOND	ENCE ADDRESS (Note: Use Bl	lock I for any change of address	Fee par	(s) Transmittal. This cert	ificate cannot be used fo er, such as an assignmen	domestic mailings of the rany other accompanying t or formal drawing, must
23719 KALOW & SP 488 MADISON 19TH FLOOR NEW YORK, N	RINGUT LLP AVENUE	/2007		Certificat	te of Mailing or Transm (s) Transmittal is being afficient postage for first ISSUE FEE address a 71) 273-2885, on the da	deposited with the United class mail in an envelope bove, or being facsimile te indicated below.
05/30/2007 WABDELR3				JUNIA GO	MZALEZ	(Depositor's name) (Signature)
01 FC:1501 1400.00				May 23	2-0-7	(Date)
02 FC-1504 APPLICATION NO.	FILING DATE	VV OF	FIRST NAMED INVENTOR	ATTO	ORNEY DOCKET NO.	CONFIRMATION NO.
10/632,393 TITLE OF INVENTION	08/01/2003 : METHODS AND COM	MPOSITIONS FOR GE	Brian McKeown NOTYPING		13428-US	2918
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	06/01/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	J		
WHALEY, PABLO S 1631 702-019000						
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
ORCHID CELLMARK, INC. PRINCETON, NEW JERSEY 08540						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💯 Corporation or other private group entity 🗀 Government						
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-0171 (enclose an extra copy of this form).						
5. Change in Entity Sta	tus (from status indicates s SMALL ENTITY state	•	☐ b. Applicant is no lor	nger claiming SMALL EN	ITITY status. See 37 CFI	R 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if requeecords of the United Sta	uired) will not be accept ites Patent and Tradema	ted from anyone other than			
Authorized Signature	Cal Illan	D. Schm	ł	Date MAY 6	25, 200=	7
Typed or printed name		Schmidt, Esq		Registration No.	39,492	
This collection of inform an application. Confident submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 I application form to the ons for reducing this bu iriginia 22313-1450. DC 13-1450.	OFR 1.311. The informate U.S.C. 122 and 37 CFI USPTO. Time will valued on the sent to the control of the contro	tion is required to obtain or R 1.14. This collection is es ry depending upon the indi the Chief Information Offic R COMPLETED FORMS T	retain a benefit by the pub timated to take 12 minute vidual case. Any commen er, U.S. Patent and Trade O THIS ADDRESS. SEN	olic which is to file (and less to complete, including ats on the amount of time mark Office, U.S. Depar ID TO: Commissioner for	by the USPTO to process) gathering, preparing, and e you require to complete tment of Commerce, P.O. r Patents, P.O. Box 1450,

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